

Policy Manual

Policy No: BEN 06-002

Subject: Coverage of Adult Dental Services in a Hospital Emergency Department

Approval: J. D. Hickory DG Date: 5/10/2006

PURPOSE OF POLICY STATEMENT: The purpose of this policy is to clarify the circumstances in which dental related services for a TennCare enrollee age 21 or older may be considered a covered service when the enrollee presents at the Emergency Department of a hospital.

POLICY:

The EMTALA (Emergency Medical Treatment and Active Labor Act) statute (42 CFR 489.24) states that if an individual comes to the emergency department of a hospital, the hospital <u>must</u> provide an appropriate medical screening examination within the capability of the hospital's emergency department, including ancillary services routinely available to the emergency department, to determine whether or not an emergency medical condition exists. The Managed Care Organization of the enrollee is required to pay for this examination.

Adult Dental Emergencies:

Effective August 1, 2005, adult enrollees age 21 and older in TennCare Medicaid and TennCare Standard were no longer eligible to receive dental services under the TennCare program. If an adult presents in the hospital emergency department with a dental problem and the hospital determines that an EMTALA screen needs to be done to determine whether or not an emergency condition exists, the Managed Care Organization of that enrollee will pay for the EMTALA screen. If the screen determines that the individual does have a medical emergency (e.g., cellulitis or sepsis secondary to a dental problem), the MCO will also pay for that medical treatment. The "origin" of the medical condition (e.g., dental abscess) is irrelevant and the MCO cannot deny payment of the claim on this basis. Once the "medical" emergency is

resolved, any related dental services that may be needed (e.g., extraction of abscessed tooth) are NOT TennCare covered services and will not be paid for by the Managed Care Organization.

If the hospital emergency department determines that the presenting condition does <u>not</u> constitute a medical emergency, but does require medical *treatment*, the MCO may, at their discretion and depending on their policies regarding prior authorization of non-emergency treatment, refer the enrollee for outpatient treatment for which they will pay. Again, any associated need for a dental service (e.g., extraction of abscessed tooth) is NOT a TennCare covered service and will not be paid for by the Managed Care Organization.

DEFINITIONS:

Emergency Medical Condition: A medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain, psychiatric disturbances and/or symptoms of substance abuse) such that the absence of immediate medical attention could reasonably be expected to result in (1) placing the health of the individual (or with respect to a pregnant woman the health of her unborn child) in serious jeopardy (2) serious impairment to bodily functions; or (3) serious dysfunction of any bodily organ or part. [42 CFR 489.24(b)]

OFFICES OF PRIMARY RESPONSIBILITY:

TennCare Chief Medical Officer TennCare Chief of Networks

REFERENCES:

42 CFR 438.114(a) 42 CFR 489.24 (b) Rule 1200-13-13-.04 Rule 1200-13-14-.04 Contractor Risk Agreement 2-3a.1; 2-3.b.3; 2-3.k.1; 2-3.t

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